

FEDERAL BUREAU OF INVESTIGATION
FOI/PA
DELETED PAGE INFORMATION SHEET
FOI/PA# 1208144-0

Total Deleted Page(s) = 1
Page 8 ~ b7D; b7E;

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XXXXXXXXXXXXXXXXXXXXXXXXXXXXX
X   Deleted Page(s)         X
X   No Duplication Fee      X
X   For this Page           X
XXXXXXXXXXXXXXXXXXXXXXXXXXXXX
```

UNITED STATES GOVERNMENT

Memorandum

TO : SAC, CHICAGO (92-350-Sub 24)

DATE: 12/18/72

FROM : SUPERVISOR

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SUBJECT: RACKETEER PROFILE PROGRAM
CHICAGO DIVISION

In connection with captioned matter, the following Chicago hoodlums are being designated for inclusion in this program:

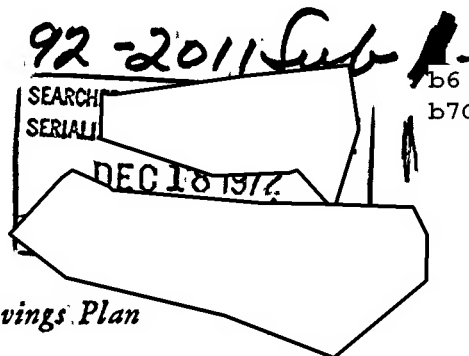
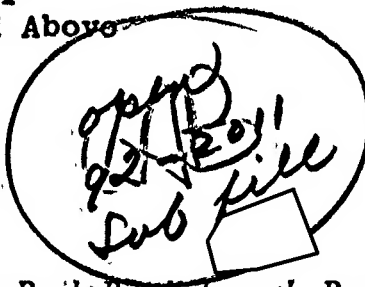
<u>Subject</u>	<u>CG File No.</u>	<u>Agent Assigned</u>
ACCARDO, ANTHONY JOSEPH	92-344	<div style="border: 1px solid black; width: 100px; height: 60px; margin: 0 auto;"></div> FORD, F. <div style="border: 1px solid black; width: 100px; height: 1.2em; margin: 0 auto;"></div>
AIUPPA, JOSEPH	92-677	
ALBANO, EUGENE	92-2506	
ALEX, GUS	92-373	
AMATO, JOSEPH	92-2282	
ARIOLA, SAM	92-2781	
ARNOLD, JOSEPH	92-1339	
BACINO, PHIL	92-1947	<div style="border: 1px solid black; width: 100px; height: 80px; margin: 0 auto;"></div>
<div style="border: 1px solid black; width: 150px; height: 50px; margin: 0 auto;"></div>	92-2374	
	92-2231	
	92-2325	
	92-2249	
BLASI, DOMINIC, aka "Butch"	92-1322	
BRANCATO, DOMINICK	92-946	KEMPF <div style="border: 1px solid black; width: 100px; height: 50px; margin: 0 auto;"></div>
BRIATTA, LOUIS	92-1372	
BUCCIERI, FIORE	92-1160	
BUCCIERI, FRANK	92-1998	
BUONAGUIDI, LAWRENCE	92-2011✓	

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Agents to whom these cases are assigned are requested to promptly execute the appropriate Racketeer Profile Forms which will be transmitted to the Bureau by SA ROBERT L. MALONE, coordinator of this program.

- 1 - C-1 Tickler
- 1 - C-10 Tickler
- 1 - SA MALONE Tickler
- 1 - Each Case Listed Above

(22)



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92-2011-Sub 1-7

SEARCHED	INDEXED
SERIAL	
JAN 8 1973	
FBI - CHICAGO	

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Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice
RACKETEER PROFILE



AGENT AND SUBJECT IDENTIFICATION *DATE*

DATE	NAME OF PERSON SUBMITTING INFORMATION									
	/SUB:									
	DATE		AGENCY				FIELD OFFICE			
	/YR: 72		/MO: 12		/DY: 21		/AGN: FBI		/FLD: E	
	OFFICE PHONE NUMBER									
NEW OR MOD	/PHN:									
	NEW *MOD*									
	VERIFICATION		SUBJECT'S IDENTIFIER							
	/VER: 1		/IDEN: 65E							
	NAME OF SUBJECT									
/NAME: BRADY, LAWRENCE M/M										
SEX (M or F)		MARITAL STATUS (R)				MAIDEN NAME OF SUBJECT				
/SEX: M		/STAT: O		/MDN:						

ALIASES

ALIAS	ALIAS *ALIAS*	*ADD*ALIAS*	*CHG*				*ALIAS*
	/AKA: BRADY, LAWRENCE M/M						
	ALIAS *ALIAS*	*ADD*ALIAS*	*CHG*				*ALIAS*
	/AKA: BRADY, LAWRENCE M/M						
	ALIAS *ALIAS*	*ADD*ALIAS*	*CHG*				*ALIAS*
	/AKA:						
	ALIAS *ALIAS*	*ADD*ALIAS*	*CHG*				*ALIAS*
	/AKA:						
	ALIAS *ALIAS*	*ADD*ALIAS*	*CHG*				*ALIAS*
	/AKA:						

NICKNAMES

NKNM	NICKNAME *NKNM*	*ADD*NKNM*	*CHG*				*NKNM*
	/NICK: LARRY THE HOOD						
	NICKNAME *NKNM*	*ADD*NKNM*	*CHG*				*NKNM*
	/NICK:						
	NICKNAME *NKNM*	*ADD*NKNM*	*CHG*				*NKNM*
	/NICK:						
	NICKNAME *NKNM*	*ADD*NKNM*	*CHG*				*NKNM*
	/NICK:						
	NICKNAME *NKNM*	*ADD*NKNM*	*CHG*				*NKNM*
	/NICK:						

INVESTIGATION *CINV* *ADD*CINV* *CHG*

CINV	DATE INVESTIGATION BEGAN				DATE INVESTIGATION CLOSED			
	/FYR: 65/FMO: 09/FDY: 24				/TYR: 00/TMO: 00/TDY: 00			
	TYPE OF INVESTIGATION				AGENCY INVESTIGATING			
	/TINV:				/AGYI:			

ADDITIONAL SOURCE OF INFORMATION *INFO* *ADD*INFO* *CHG*

INFO	NAME OF PERSON IN AGENCY TO CONTACT									
	/NAME:									
	TITLE OF ABOVE INDIVIDUAL									
	/TITLE:									
	DIVISION EMPLOYED BY									
	/DIV:									
	AGENCY NAME									
	/AG:									
	CITY WHERE AGENCY IS LOCATED									
	/CITY:									
	STATE (R)		ZIP CODE		LEVEL OF GOVERNMENT (R)					
	/ST:		/ZIP:		/LVL:					
	INFO		*ADD*INFO*		*CHG*		*INFO*			
	NAME OF PERSON IN AGENCY TO CONTACT									
	/NAME:									
	TITLE OF ABOVE INDIVIDUAL									
	/TITLE:									
	DIVISION EMPLOYED BY									
	/DIV:									
	AGENCY NAME									
/AG:										
CITY WHERE AGENCY IS LOCATED										
/CITY:										
STATE (R)		ZIP CODE		LEVEL OF GOVERNMENT (R)						
/ST:		/ZIP:		/LVL:						

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Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice
RACKETEER PROFILE



SUBJECT'S IDENTIFYING NUMBERS										*ID*		*ADD*ID*		*CHG		*ID*			
VERIFICATION										FBI NUMBER									
/VER: <input checked="" type="checkbox"/>										/FBI: 1599701									
ORG. CRIME & RACKET. #										SOCIAL SECURITY NUMBER									
/OCR:										/SSN: 360074585									
CRIMINAL IDENTIFICATION NUMBER																			
/PD: 1R381072																			
NAME OF AGENCY WHICH ASSIGNED ABOVE NUMBER																			
/AGENCY: CHICAGO PD																			
STATE (R)										ZIP CODE									
/ST: IL										/ZIP: 60605									
ID										*ADD*ID*		*CHG		*ID*					
VERIFICATION										CRIMINAL IDENTIFICATION NUMBER									
/VER: <input checked="" type="checkbox"/>										/PD:									
NAME OF AGENCY WHICH ASSIGNED ABOVE NUMBER																			
/AGENCY:																			
STATE (R)										ZIP CODE									
/ST:										/ZIP:									
ID										*ADD*ID*		*CHG		*ID*					
VERIFICATION										FBI NUMBER									
/VER: <input checked="" type="checkbox"/>										/FBI:									
ORG. CRIME & RACKET. #										SOCIAL SECURITY NUMBER									
/OCR:										/SSN:									
CRIMINAL IDENTIFICATION NUMBER																			
/PD:																			
NAME OF AGENCY WHICH ASSIGNED ABOVE NUMBER																			
/AGENCY:																			
STATE (R)										ZIP CODE									
/ST:										/ZIP:									
ID										*ADD*ID*		*CHG		*ID*					
VERIFICATION										CRIMINAL IDENTIFICATION NUMBER									
/VER: <input checked="" type="checkbox"/>										/PD:									
NAME OF AGENCY WHICH ASSIGNED ABOVE NUMBER																			
/AGENCY:																			
STATE (R)										ZIP CODE									
/ST:										/ZIP:									
ID										*ADD*ID*		*CHG		*ID*					
VERIFICATION										DATE OF ISSUE									
/VER: <input checked="" type="checkbox"/>										/FMR: /FMY: /FMY: /TYR: /TMO: /TDY:									
TYPE OF NUMBER OR LICENSE																			
/TNBR: DRIVERS LICENSE																			
NUMBER																			
/NBR: 463052015356																			
ISSUING AGENCY										ISSUING STATE (R)									
/AGY: SECRETARY OF STATE										/ST: IL									
NBR										*ADD*NBR*		*CHG		*NBR*					
VERIFICATION										DATE OF ISSUE									
/VER: <input checked="" type="checkbox"/>										/FMR: /FMY: /FMY: /TYR: /TMO: /TDY:									
TYPE OF NUMBER OR LICENSE																			
/TNBR:																			
NUMBER																			
/NBR:																			
ISSUING AGENCY										ISSUING STATE (R)									
/AGY:										/ST:									
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VERIFICATION										DATE OF ISSUE									
/VER: <input checked="" type="checkbox"/>										/FMR: /FMY: /FMY: /TYR: /TMO: /TDY:									
TYPE OF NUMBER OR LICENSE																			
/TNBR:																			
NUMBER																			
/NBR:																			
ISSUING AGENCY										ISSUING STATE (R)									
/AGY:										/ST:									

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SEARCHED	INDEXED
SERIALIZED	
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15 Legitimate Enterprise

18 Description

Race	Complexion	Build
01 White	01 Light	01 Small
02 Negro	02 Ruddy	02 Slight
03 Other	03 Dark	03 Slender
	04 Olive	04 Stocky
	05 Swarthy	05 Heavy
		06 Obese
		07 Gross
		08 Medium

Height	Weight
01 Up to 5'1"	01 Up to 120
02 5'2" - 5'3"	02 121 - 130
03 5'4" - 5'5"	03 131 - 140
04 5'6" - 5'7"	04 141 - 150
05 5'8" - 5'9"	05 151 - 160
06 5'10" - 5'11"	06 161 - 170
07 5'11" - 6'	07 171 - 185
08 6'0" - 6'1"	08 186 - 200
09 6'1" and over	09 Over

16 Illegal Activity

19 Areas of Activity Other Than Origin Office
(Use the initials of office)

01 _____
02 _____
03 _____
04 _____

20 Places Frequented

17 Nicknames and or Alias

01 _____
02 _____

Remarks: _____

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Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice
RACKETEER PROFILE



VITAL STATISTICS ON SUBJECT												
BIRTH				*ADD*BIRTH*				*CHG*				
BIRTH	VERIFICATION		CITY WHERE SUBJECT WAS BORN									
	/VER: D		/CITY: CHICAGO									
	STATE (R)		ZIP CODE		DATE OF BIRTH				CITIZENSHIP (R)			
	/ST: IL		/ZIP: 60600		/FYR: 15 /FMO: 12 /FDY: 15				/CIT: US			
DEATH	*DEATH*				*ADD*DEATH*				*CHG*			
	VERIFICATION		CITY WHERE SUBJECT DIED									
	/VER:		/CITY:		DATE OF DEATH							
	STATE (R)		ZIP CODE		DATE OF DEATH							
PHYS	VERIFICATION		MENTAL OR PHYSICAL HEALTH PROBLEM									
	/VER:		/HLTH:		FINGERPRINT CLASSIFICATION (R)				HAIR COLOR (R)			
	HEIGHT		/FING:						EYE COLOR (R)			
	/HT: 506								/EYE: BROWN			
PHYS	PHYSICAL MARK, SCAR, ETC. (R)				COMPLEXION (R)				WEIGHT			
	/MARK:				/CMPLX: DARK				/WT: 200			
	RACE (R)				BUILD (R)							
	/RACE: CAUCASIAN				/BLD: HEAVY							
ED	*PHYS*				*ADD*PHYS*				*CHG*			
	VERIFICATION		PHYSICAL MARK, SCAR, ETC. (R)									
	/VER:		/MARK:		MENTAL OR PHYSICAL HEALTH PROBLEM							
	/HLTH:											
ADDR	SUBJECT'S RESIDENCE/TELEPHONE											
	ADDR				*ADD*ADDR*				*CHG*			
	APARTMENT, HOTEL, OR PRISON NAME											
	/EST: TIDES MOTEL											
ADDR	STREET NUMBER				STREET NAME				VERIFICATION			
	/STNBR: 5235				/STNM: SHERIDAN RD N				/VER:			
	CITY OF RESIDENCE				STATE (R)							
	/CITY: CHICAGO				/ST: IL							
ED	ZIP CODE				DATES OF RESIDENCE							
	/ZIP: 60600				/FYR: /FMO: /FDY: /TYR: /TMO: /TDY:							
	APARTMENT OR ROOM NO.				TELEPHONE (1)				TELEPHONE (2)			
	/APT:				/TEL1:				/TEL2:			
ED	EDUCATION											
	ED				*ADD*ED*				*CHG*			
	VERIFICATION		ATTENDANCE DATES									
	/VER: A		/FYR: /FMO: /FDY: /TYR: /TMO: /TDY:									
ED	NAME OF SCHOOL											
	STREET NUMBER				STREET NAME							
	/STNBR:				/STNM:							
	CITY WHERE SCHOOL IS LOCATED				STATE (R)							
ED	/CITY: CHICAGO				/ST:							
	ZIP CODE				TYPE OF SCHOOL (R)				HIGHEST GRADE COMPLETED (R)			
	/ZIP:				/SCH: GRAMMAR				/GRD: 6			
	MAJOR											
MIL	MILITARY RECORD											
	MIL				*ADD*MIL*				*CHG*			
	VERIFICATION		DATES IN SERVICE									
	/VER:		/FYR: /FMO: /FDY: /TYR: /TMO: /TDY:									
MIL	BRANCH OF SERVICE (R)											
	/BRCH:				MILITARY OCCUPATIONAL SPECIALITY				HIGHEST GRADE or RANK			
	/MOS:								/RANK:			
	TYPE OF SEPARATION											
MIL	/SEP:				RESERVE BRANCH (R)				HIGHEST GRADE or RANK (Reserve):			
	/RSRV:								/RNK:			
	RESERVE DATES											
	/NYR: /NMO: /NDY: /MYR: /MMO: /MDY:											
HOBBY	HOBBY											
	HOBBY				*ADD*HOBBY*				*CHG*			
	KIND OF HOBBY											
	/HOB:											
HOBBY	CITY WHERE HOBBY TAKES PLACE											
	/CITY:											
	STATE (R)				ZIP CODE				ANNUAL COST (Dollars)			
	/ST:				/ZIP:				/COST:			

Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice
RACKETEER PROFILE



AGENT AND SUBJECT IDENTIFICATION *DATE*										
DATE	NAME OF PERSON SUBMITTING INFORMATION									
	/SUB: [REDACTED]									
	DATE			AGENCY			FIELD OFFICE			
	/YR: 73 /MO: 03 /DY: 27			/AGN: FBI			/FLD: E			
	OFFICE PHONE NUMBER									
NEW OR MOD	/PHN: [REDACTED]									
	NEW (MOD)									
	VERIFICATION		SUBJECT'S IDENTIFIER							
	/VER: [REDACTED]		/IDEN: 65E							
	NAME OF SUBJECT									
ALIASES	/NAME: BRADY, LAWRENCE NMIN									
	SEX (M or F)		MARITAL STATUS (R)				MAIDEN NAME OF SUBJECT			
	/SEX: [REDACTED]		/STAT: [REDACTED]		/MDN: [REDACTED]					
	ALIAS *ALIAS* *ADD*ALIAS* *CHG									
	/AKA: [REDACTED]									
ALIAS	ALIAS *ALIAS* *ADD*ALIAS* *CHG									
	/AKA: [REDACTED]									
	ALIAS *ALIAS* *ADD*ALIAS* *CHG									
	/AKA: [REDACTED]									
	ALIAS *ALIAS* *ADD*ALIAS* *CHG									
NICKNAMES	/AKA: [REDACTED]									
	NICKNAME *NKNM* *ADD*NKNM* *CHG									
	/NICK: [REDACTED]									
	NICKNAME *NKNM* *ADD*NKNM* *CHG									
	/NICK: [REDACTED]									
INVESTIGATION	NICKNAME *NKNM* *ADD*NKNM* *CHG									
	/NICK: [REDACTED]									
	NICKNAME *NKNM* *ADD*NKNM* *CHG									
	/NICK: [REDACTED]									
	NICKNAME *NKNM* *ADD*NKNM* *CHG									
CINV	/NICK: [REDACTED]									
	DATE INVESTIGATION BEGAN									
	DATE INVESTIGATION CLOSED									
	/FYR: [REDACTED] /FMO: [REDACTED] /FDY: [REDACTED] /TYR: [REDACTED] /TMO: [REDACTED] /TDY: [REDACTED]									
	TYPE OF INVESTIGATION									
INFO	AGENCY INVESTIGATING									
	/AGYI: [REDACTED]									
	ADDITIONAL SOURCE OF INFORMATION *INFO* *ADD*INFO* *CHG									
	/INFO: [REDACTED]									
	NAME OF PERSON IN AGENCY TO CONTACT									
INFO	/NAME: [REDACTED]									
	TITLE OF ABOVE INDIVIDUAL									
	/TITLE: [REDACTED]									
	DIVISION EMPLOYED BY									
	/DIV: [REDACTED]									
INFO	AGENCY NAME									
	/AG: [REDACTED]									
	CITY WHERE AGENCY IS LOCATED									
	/CITY: [REDACTED]									
	STATE (R) ZIP CODE LEVEL OF GOVERNMENT (R)									
INFO	/ST: [REDACTED] /ZIP: [REDACTED] /LVL: [REDACTED]									
	INFO *ADD*INFO* *CHG									
	/INFO: [REDACTED]									
	NAME OF PERSON IN AGENCY TO CONTACT									
	/NAME: [REDACTED]									
INFO	TITLE OF ABOVE INDIVIDUAL									
	/TITLE: [REDACTED]									
	DIVISION EMPLOYED BY									
	/DIV: [REDACTED]									
	AGENCY NAME									
INFO	/AG: [REDACTED]									
	CITY WHERE AGENCY IS LOCATED									
	/CITY: [REDACTED]									
	STATE (R) ZIP CODE LEVEL OF GOVERNMENT (R)									
	/ST: [REDACTED] /ZIP: [REDACTED] /LVL: [REDACTED]									

FORM CM-77

VITAL STATISTICS

Name: Lawrence BRADY
Date of Birth: 12-15-45
Place of Birth: City Chicago State Illinois Zip Code 60644
Citizenship: Country US Verification? (Page 10) No verified
from Illinois Driver Lic, CPD records, USP records

Date of Death: _____
Place of Death: City _____ State _____ Zip Code _____
Cause of Death: _____
Verification? (Page 10) _____

Height: 5'6" 5 Weight: 200
Hair Color: Brown Eye Color: Brown
Build: heavy Complexion: medium (dark)
Race: White Physical Mark, Scar, Etc: _____
Mental or Physical (A) Kind of mark
Health Problem: (B) Position
Verification? (p.10) (C) Body part

(For above, see page 22)

Residence: Street Number 5235 N. Sheridan Road City Chicago
State Illinois Zip Code 60644
Name of Apartment, Hotel or Prison: Tides Motel
Apartment or Room Number: _____
Dates of Residence: _____
Telephone Number (s) _____
Verification? (Page 10) _____

Education: Grammar School
Name of School: _____
Address: Street Number _____ City Chicago
State _____ Zip Code _____
Type of School: (p. 18)
Highest Grade Completed: 8 (p. 18)
Major: _____
Attendance Dates: _____
Verification? (p. 10) No verification

Military Record: No military Service Highest Grade or Rank: _____
Dates in Service: _____ Type of Separation: _____
Branch of Service: (p. 22) _____ Reserve Branch: _____
Military Occupational Specialty: _____ Highest Grade or Rank (Reserve): _____
Reserve Dates: 92-2011 Feb 1 4
Verification? _____

Hobby: _____
Kind of Hobby: _____
Where Hobby Takes Place: City _____ State _____ Zip Code _____
Annual Cost: _____

92-2011 Sub 1-

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	FM-CHICAGO

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Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice
RACKETEER PROFILE



RELATIVE		*RELAT*	*ADD*	*RELAT*	*CHG*	*RELAT*
RELAT	VERIFICATION					
	/VER:					
	NAME OF RELATIVE					
	/NAME:					
	MAIDEN NAME OF RELATIVE			SEX (M OR F)	MARITAL STATUS (R)	
	/MDN:		/SEX:		/STAT:	
	RELATIONSHIP TO SUBJECT (R)					
	/REL:					
REL BIRTH	VERIFICATION					
	/VER:					
	CITY WHERE RELATIVE WAS BORN					
	/CITY:					
	STATE (R)		ZIP CODE		DATE OF BIRTH	
	/ST:		/ZIP:		/FYR:	
	/FMO:		/FDY:		/CIT:	
	/RELDEATH*		*ADD*		*CHG*	
REL DEATH	VERIFICATION					
	/VER:					
	CITY WHERE RELATIVE DIED					
	/CITY:					
	STATE (R)		ZIP CODE		DATE OF DEATH	
	/ST:		/ZIP:		/TYR:	
	/TMO:		/TDY:		CAUSE OF DEATH	
	/DEAD:					
RELATIVE'S RESIDENCE/TELEPHONE		*RELAD*	*ADD*	*RELAD*	*CHG*	*RELAD*
RELAD	VERIFICATION					
	/VER:					
	DATES OF RESIDENCE					
	/FYR:		/FMO:		/FDY:	
	/TYR:		/TMO:		/TDY:	
	APARTMENT, HOTEL OR PRISON NAME					
	/EST:					
	STREET NUMBER		STREET NAME			
	/STNBR:		/STNM:			
	CITY OF RESIDENCE					
	/CITY:					
	STATE (R)		ZIP CODE		APARTMENT OR ROOM NO.	
/ST:		/ZIP:		/APT:		
TELEPHONE (1)		TELEPHONE (2)				
/TEL1:		/TEL2:				
RELATIVE'S EMPLOYMENT		*RELEMP*	*ADD*	*RELEMP*	*CHG*	*RELEMP*
RELEMP	VERIFICATION					
	/VER:					
	NAME OF BUSINESS WHERE EMPLOYED					
	/EST:					
	STREET NUMBER		STREET NAME			
	/STNBR:		/STNM:			
	CITY WHERE BUSINESS IS LOCATED					
	/CITY:					
STATE (R)		ZIP CODE				
/ST:		/ZIP:				
RELATIVE'S IDENTIFYING NUMBERS		*RELID*	*ADD*	*RELID*	*CHG*	*RELID*
RELID	VERIFICATION					
	/VER:					
	FBI NUMBER					
	/FBI:					
	ORGANIZED CRIME & RACKETEERING NUMBER			SOCIAL SECURITY NUMBER		
	/OCR:		/SSN:			
	POLICE DEPARTMENT NUMBER					
	/PD:					
	POLICE DEPARTMENT CITY					
	/CITY:					
	STATE (R)		ZIP CODE			
	/ST:		/ZIP:			
	RELID		*ADD*		*CHG*	
	VERIFICATION					
/VER:						
POLICE DEPARTMENT NUMBER						
/PD:						
POLICE DEPARTMENT CITY						
/CITY:						
STATE (R)		ZIP CODE				
/ST:		/ZIP:				

FORM CM-84 (Ed. 5-72)

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1-1
BRAD 1

RELATIVES
(SPOUSE ONLY)

b6
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Name of relative:

Maiden name of relative:

Sex F Marital Status Separated

Relationship to subject: wife

Subrelation to subject:

Verification: I & ✓

City, state, and zip code
where relative was born: Chicago, Ill.

Date of birth:

Country of citizenship: US

Verification: ✓

City, state, and zip code
where relative died:

Date of death:

Cause of death:

Verification: _____

Dates of residence: 2/73 to date

Name of apartment, hotel or prison:

Street address, city, state and
zip code of residence:

Apartment or room number:

Telephone number(s):

Verification: ✓

FORM CM-84

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§
§

SEARCHED INDEXED
SERIALIZED FILED
FBI—CHICAGO

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Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice
RACKETEER PROFILE



HANGOUTS AND PLACES FREQUENTED										*HANGOUT*										
VERIFICATION		TYPE OF ESTABLISHMENT (R)																		
/VER:	I	/TEST:		POOL HALL																
NAME OF PLACE FREQUENTED (HANGOUT)																				
/EST:	GRAZIANOS POOL HALL																			
STREET NUMBER		STREET NAME																		
/STNBR:			/STNM:		GRAND AVE															
CITY WHERE ESTABLISHMENT IS LOCATED																				
/CITY:	CHICAGO																			
STATE (R)		ZIP CODE		FREQUENCY (R)		AVERAGE LENGTH OF STAY (in days)														
/ST:	IL	/ZIP:		60600		/FRE:		DAILY		/STAY:										
HANGOUT		*ADD*HANGOUT*		*CHG		*HANGOUT*														
VERIFICATION		TYPE OF ESTABLISHMENT (R)																		
/VER:		/TEST:																		
NAME OF PLACE FREQUENTED (HANGOUT)																				
/EST:																				
STREET NUMBER		STREET NAME																		
/STNBR:			/STNM:																	
CITY WHERE ESTABLISHMENT IS LOCATED																				
/CITY:																				
STATE (R)		ZIP CODE		FREQUENCY (R)		AVERAGE LENGTH OF STAY (in days)														
/ST:		/ZIP:				/FRE:				/STAY:										
HANGOUT		*ADD*HANGOUT*		*CHG		*HANGOUT*														
VERIFICATION		TYPE OF ESTABLISHMENT (R)																		
/VER:		/TEST:																		
NAME OF PLACE FREQUENTED (HANGOUT)																				
/EST:																				
STREET NUMBER		STREET NAME																		
/STNBR:			/STNM:																	
CITY WHERE ESTABLISHMENT IS LOCATED																				
/CITY:																				
STATE (R)		ZIP CODE		FREQUENCY (R)		AVERAGE LENGTH OF STAY (in days)														
/ST:		/ZIP:				/FRE:				/STAY:										
HANGOUT		*ADD*HANGOUT*		*CHG		*HANGOUT*														
VERIFICATION		TYPE OF ESTABLISHMENT (R)																		
/VER:		/TEST:																		
NAME OF PLACE FREQUENTED (HANGOUT)																				
/EST:																				
STREET NUMBER		STREET NAME																		
/STNBR:			/STNM:																	
CITY WHERE ESTABLISHMENT IS LOCATED																				
/CITY:																				
STATE (R)		ZIP CODE		FREQUENCY (R)		AVERAGE LENGTH OF STAY (in days)														
/ST:		/ZIP:				/FRE:				/STAY:										
HANGOUT		*ADD*HANGOUT*		*CHG		*HANGOUT*														
VERIFICATION		TYPE OF ESTABLISHMENT (R)																		
/VER:		/TEST:																		
NAME OF PLACE FREQUENTED (HANGOUT)																				
/EST:																				
STREET NUMBER		STREET NAME																		
/STNBR:			/STNM:																	
CITY WHERE ESTABLISHMENT IS LOCATED																				
/CITY:																				
STATE (R)		ZIP CODE		FREQUENCY (R)		AVERAGE LENGTH OF STAY (in days)														
/ST:		/ZIP:				/FRE:				/STAY:										
HANGOUT		*ADD*HANGOUT*		*CHG		*HANGOUT*														
TRAVEL																				
VERIFICATION		DATES OF TRAVEL																		
/VER:	I	/FYR:		73		/FMO:		03		/FDY:	21	/TYR:	73	/TMO:		03		/TDY:		21
NAME OF LODGING																				
/EST:	STARDUST HOTEL																			
STREET NUMBER		STREET NAME																		
/STNBR:			/STNM:																	
CITY WHERE LODGING IS LOCATED																				
/CITY:	LAS VEGAS																			
STATE (R)		ZIP CODE		MODE OF TRAVEL (R)																
/ST:	NV	/ZIP:				/MODE:		PLANE												
NAME OF CARRIER																				
/CARNM:																				
TRAVEL		*ADD*TRAVEL*		*CHG		*TRAVEL*														
VERIFICATION		DATES OF TRAVEL																		
/VER:		/FYR:				/FMO:				/FDY:		/TYR:		/TMO:				/TDY:		
NAME OF LODGING																				
/EST:																				
STREET NUMBER		STREET NAME																		
/STNBR:			/STNM:																	
CITY WHERE LODGING IS LOCATED																				
/CITY:																				
STATE (R)		ZIP CODE		MODE OF TRAVEL (R)																
/ST:		/ZIP:				/MODE:														
NAME OF CARRIER																				
/CARNM:																				



RACKETEER PROFILE

SUBJECT'S EMPLOYMENT										*EMP*		*ADD*EMP*		*CHG		*EMP*					
EMP	VERIFICATION		DATES OF EMPLOYMENT																		
	/VER:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		
	NAME OF BUSINESS WHERE EMPLOYED																				
	/EST:		VINE EMPLOYED																		
	STREET NUMBER				STREET NAME																
	/STNBR:				/STNM:																
	CITY WHERE BUSINESS IS LOCATED																				
	/CITY:																				
	STATE (R)				ZIP CODE				TYPE OF BUSINESS (R)												
	/ST:				/ZIP:				/BUS:												
JOB TITLE (DESCRIPTION OF WORK)										ANNUAL INCOME (IN THOUS.)											
/JOB:										/SAL:											
FINANCIAL HOLDING OR OBLIGATION										*FINAN*		*ADD*FINAN*		*CHG		*FINAN*					
FINAN	VERIFICATION		TYPE OF HOLDING OR OBLIGATION (R)																		
	/VER:		/TFIN:																		
	NAME OF BUSINESS																				
	/EST:																				
	STREET NUMBER				STREET NAME																
	/STNBR:				/STNM:																
	CITY WHERE BUSINESS OR REAL ESTATE IS LOCATED																				
	/CITY:																				
	STATE (R)				ZIP CODE				TYPE OF BUSINESS (R)										% CONTROL		
	/ST:				/ZIP:				/BUS:										/CONT:		
NUMBER OF SHARES (IN 100'S)										FACE VALUE OR PRINCIPAL (IN 100'S)										ANNUAL INCOME (IN 100'S)	
/SHR:										/VALUE:										/INC:	
FINAN										*ADD*FINAN*		*CHG		*FINAN*							
FINAN	VERIFICATION		TYPE OF HOLDING OR OBLIGATION (R)																		
	/VER:		/TFIN:																		
	NAME OF BUSINESS																				
	/EST:																				
	STREET NUMBER				STREET NAME																
	/STNBR:				/STNM:																
	CITY WHERE BUSINESS OR REAL ESTATE IS LOCATED																				
	/CITY:																				
	STATE (R)				ZIP CODE				TYPE OF BUSINESS (R)										% CONTROL		
	/ST:				/ZIP:				/BUS:										/CONT:		
NUMBER OF SHARES (IN 100'S)										FACE VALUE OR PRINCIPAL (IN 100'S)										ANNUAL INCOME (IN 100'S)	
/SHR:										/VALUE:										/INC:	
BANK ACCOUNT										*BANK*		*ADD*BANK*		*CHG		*BANK*					
BANK	VERIFICATION		DATES OF ACCOUNT																		
	/VER:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		
	TYPE OF ACCOUNT (R)				ACCOUNT NUMBER																
	/ACCT:				/ACCTNBR:																
	NAME OF BANK																				
	/EST:																				
	BANK BRANCH NAME																				
	/BRNM:																				
	STREET NUMBER				STREET NAME																
	/STNBR:				/STNM:																
CITY WHERE BANK IS LOCATED																					
/CITY:																					
STATE (R)				ZIP CODE																	
/ST:				/ZIP:																	
BANK										*ADD*BANK*		*CHG		*BANK*							
BANK	VERIFICATION		DATES OF ACCOUNT																		
	/VER:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		/FMR:		
	TYPE OF ACCOUNT (R)				ACCOUNT NUMBER																
	/ACCT:				/ACCTNBR:																
	NAME OF BANK																				
	/EST:																				
	BANK BRANCH NAME																				
	/BRNM:																				
	STREET NUMBER				STREET NAME																
	/STNBR:				/STNM:																
CITY WHERE BANK IS LOCATED																					
/CITY:																					
STATE (R)				ZIP CODE																	
/ST:				/ZIP:																	

Organized Crime & Racketeering Section
Criminal Division
United States Department of Justice
RACKETEER PROFILE



AGENT AND SUBJECT IDENTIFICATION *DATE*										
DATE	NAME OF PERSON SUBMITTING INFORMATION									
	/SUB: [REDACTED]									
	DATE		AGENCY		FIELD OFFICE					
	/YR: 73 /MO: 06 /DY: 25		/AGN: FBI		/FLD: E					
	OFFICE PHONE NUMBER									
NEW OR MOD	/PHN: [REDACTED]									
	NEW *MOD*									
	VERIFICATION		SUBJECT'S IDENTIFIER							
	/VER: [REDACTED]		/IDEN: 65E							
	NAME OF SUBJECT									
ALIASES	/NAME: BRADI, LAWRENCE NMN									
	SEX (M or F)		MARITAL STATUS (R)		MAIDEN NAME OF SUBJECT					
	/SEX: [REDACTED]		/STAT: [REDACTED]		/MDN: [REDACTED]					
	ALIASES									
	/AKA: [REDACTED]									
ALIAS	ALIAS *ALIAS*		*ADD*ALIAS*		*CHG		*ALIAS*			
	/AKA: [REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
	ALIAS *ALIAS*		*ADD*ALIAS*		*CHG		*ALIAS*			
	/AKA: [REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
	ALIAS *ALIAS*		*ADD*ALIAS*		*CHG		*ALIAS*			
NICKNAMES	/AKA: [REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
	ALIAS *ALIAS*		*ADD*ALIAS*		*CHG		*ALIAS*			
	/AKA: [REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
	ALIAS *ALIAS*		*ADD*ALIAS*		*CHG		*ALIAS*			
	/AKA: [REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
NKNM	ALIAS *ALIAS*		*ADD*ALIAS*		*CHG		*ALIAS*			
	/AKA: [REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
	ALIAS *ALIAS*		*ADD*ALIAS*		*CHG		*ALIAS*			
	/AKA: [REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
	ALIAS *ALIAS*		*ADD*ALIAS*		*CHG		*ALIAS*			
INVESTIGATION	/AKA: [REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
	NICKNAME *NKNM* *ADD*NKNM* *CHG									
	/NICK: [REDACTED]									
	NICKNAME *NKNM* *ADD*NKNM* *CHG									
	/NICK: [REDACTED]									
CINV	NICKNAME *NKNM* *ADD*NKNM* *CHG									
	/NICK: [REDACTED]									
	NICKNAME *NKNM* *ADD*NKNM* *CHG									
	/NICK: [REDACTED]									
	NICKNAME *NKNM* *ADD*NKNM* *CHG									
INFO	/NICK: [REDACTED]									
	INVESTIGATION *CINV* *ADD*CINV* *CHG									
	CINV									
	DATE INVESTIGATION BEGAN									
	DATE INVESTIGATION CLOSED									
ADDITIONAL SOURCE OF INFORMATION	/FYR: [REDACTED]		/FMO: [REDACTED]		/FDY: [REDACTED]		/TYR: [REDACTED]		/TMO: [REDACTED]	
	/TDY: [REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
	TYPE OF INVESTIGATION									
	AGENCY INVESTIGATING									
	/TINV: AR /AGYI: [REDACTED]									
INFO	*INFO* *ADD*INFO* *CHG									
	INFO									
	NAME OF PERSON IN AGENCY TO CONTACT									
	/NAME: [REDACTED]									
	TITLE OF ABOVE INDIVIDUAL									
INFO	/TITLE: [REDACTED]									
	DIVISION EMPLOYED BY									
	/DIV: [REDACTED]									
	AGENCY NAME									
	/AG: [REDACTED]									
INFO	CITY WHERE AGENCY IS LOCATED									
	/CITY: [REDACTED]									
	STATE (R)		ZIP CODE		LEVEL OF GOVERNMENT (R)					
	/ST: [REDACTED]		/ZIP: [REDACTED]		/LVL: [REDACTED]					
	INFO *ADD*INFO* *CHG									
INFO	*INFO*									
	NAME OF PERSON IN AGENCY TO CONTACT									
	/NAME: [REDACTED]									
	TITLE OF ABOVE INDIVIDUAL									
	/TITLE: [REDACTED]									
INFO	DIVISION EMPLOYED BY									
	/DIV: [REDACTED]									
	AGENCY NAME									
	/AG: [REDACTED]									
	CITY WHERE AGENCY IS LOCATED									
INFO	/CITY: [REDACTED]									
	STATE (R)		ZIP CODE		LEVEL OF GOVERNMENT (R)					
	/ST: [REDACTED]		/ZIP: [REDACTED]		/LVL: [REDACTED]					

Name:

~~Lawrence BOONAGUID~~

Name of Place Frequented:
(Hangout)

~~Graziano's~~

~~(BRADI)~~
Pool Hall

92-2011

Type of Establishment:
(see attached page)

Verification:
(see attached page)

2

Street Address, City, State, and
Zip Code Where Establishment is Located:

May & Grand, Co

Frequency:
(see attached page)

daily

Average Length of stay:
(in days)

Dates of Travel:

3/21-26/73

Name of Lodging:

Stardust Hotel

Street Address, City, State, and
Zip Code of Lodging:

Las Vegas

Mode of Travel:

air

Name of Carrier:

Verification:

(see attached page)

D & I



FORM CN-79

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Name: *Bradi*
Lawrence Buonaiuto
Dates of Employment:
Name of Business Where Employed:

unemployed & Gambling

Address, City, State, and
Zip Code Where Employed:

Verification:
(refer to attached pg. 1)
Type of Business:
(refer to attached pg. 1)

Job Title:
Annual Income:

Type of Financial Holding or
Obligation: (refer to attached pg. 2)

Verification:
(refer to attached pg. 1)

Name of Business:

Street Address, City, State, and Zip Code
Where Business or Real Estate is Located:

Type of Business:
(refer to attached pg. 1)

Number of Shares:
Percent(%) Control:
Face Value or Principal:
Annual Income:
(from financial holdings)

Type of Bank Account:
(refer to attached pg. 2)
Verification:
(refer to attached pg. 1)

Dates of Account:
Account Number:
Name of Bank:
Bank Branch Name:
Street Address, City, State,
and Zip Code of Bank: